Case 20-14788-elf Doc 6 Filed 12/15/20 Entered 12/18/20 14:40:45 Document Page 1 of 26

			Boodinone 1	<u>age</u> = 0. =0	
Fill in this i	information to id	entify your case and this	filing:	No. 1. No	
Debtor 1	DAVID First Name	Middle Name	THOMPSON Last Name		
	s Bankruptcy Court f	Middle Name or the: EASTERN DISTRICT	Last Name OF PENNSYLVANIA	DEC 15 2020	
Case number		6A/B		J. R	Check if this is an amended filing
		R: Property	W		12/15

ile wo. Flobelty

In each category, separately list and describe items. List an asset only once. If an assefits in more than one category, list the asset in the category where you think it fits best. Be ascomplete and accurate as possible. If two married people are filing together, bot h are equally responsible for supplying correct information. If more space i needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In Part 1: 1... Do you own or have any legal or equitable interest in any residence, building, land, or similar property? No. Go to Part 2. ☐ Yes. Where is the property? What is the property? Check all that apply, Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D ☐ Single-family home Creditors Who Have Claims Secured by Property. Duplex or multi-unit building Street address, if available, or other description Condominium or cooperative Current value of the Current value of the entire property? portion you own? ■ Manufactured or mobile home ☐ Land ■ Investment property Describe the nature of your ownership ☐ Timeshare ZIP Code interest (such as fee simple, tenancy by City Other_ the entireties, or a life estate), if known. Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only County ☐ Check if this is community property Debtor 1 and Debtor 2 only (see instructions) At least one of the debtors and another Other information you wish to add bout this item, such as I oca! property identification number: If you own or have more than one, list here: What is the property? Check all that apply. Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Single-family home Creditors Who Have Claims Secured by Property. Duplex or multi-unit building Street address, if available, or other description Condominium or cooperative Current value of the Current value of the entire property? portion you own? Manufactured or mobile home ☐ Land ■ Investment property Describe the nature of your ownership ■ Timeshare interest (such as fee simple, tenancy by City Other_ the entireties, or a life estate), if known. Who has an interest in the property? Check one, Debtor 1 only Debtor 2 only County Debtor 1 and Debtor 2 only ☐ Check if this is community property (see instructions) At least one of the debtors and another Other information you wish to add bout this item, such as I ocal property identification number: _

Debtor 1	Case 20-1478 DAVID First Name Middle	THOMP	Filed 12/15/20 Entered 12/18/20 SON Document Page 2 of 26 number (# k		
1.3.	Street address, if available	o, or other description	What is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home	Do not deduct secured clathe amount of any secure Creditors Who Have Clair Current value of the entire property?	d claims on Schedule D: ns Secured by Property.
	City	State ZIP Code	Land Investment property Timeshare Other	Describe the nature of interest (such as fee the entireties, or a life	simple, tenancy by
	County	9	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Other information you wish to add bout this item property identification number:		mmunity property
2 Add t	the dollar value of the p have attached for Part 1	ortion you own for a . Write that number	II of your entries from Part 1, including any entries there.	s for pages	\$0.00
you own	that someone else drive , vans, trucks, tractors,	s. If you lease a vehic	st in any vehicles, whether they are registered or le, also report it on Schedule G: Executory Contracts as, motorcycles		5
3.1.	Make: Model: Year: Approximate mileage: Other information: GOOD CONDITION	HONDA CIVIC 2017 82100	Who has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions)	Do not deduct secured class the amount of any secure Creditors Who Have Clair Current value of the entire property? \$ 9014.00	d claims on Schedule D
If you 3.2.	own or have more than Make: Model: Year: Approximate mileage: Other information:	one, describe here:	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another	Do not deduct secured clathe amount of any secure Creditors Who Have Claim Current value of the entire property?	d claims on <i>Śchedule D</i> :
	Sale monday.		☐ Check If this is community property (see instructions)	\$	\$

Case 20-14788-elf Doc 6 Filed 12/15/20 Entered 12/18/20 14:40:45 Desc Main THOMPSON Document Page 3 of 26 number (# known)_____ Debtor 1 First Name Who has an interest in the property? Check one. Do not deduct secured claims or exemptions. Put 3.3 Make the amount of any secured claims on Schedule D: Debtor 1 only Model: Creditors Who Have Claims Secured by Property. Debtor 2 only Year: Current value of the Current value of the Debtor 1 and Debtor 2 only entire property? portion you own? Approximate mileage: At least one of the debtors and another Other information: ☐ Check if this is community property (see instructions) Who has an interest in the property? Check one. 3.4 Make: Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Debtor 1 only Model: Creditors Who Have Claims Secured by Property. Debtor 2 only Year: Current value of the Current value of the Debtor 1 and Debtor 2 only portion you own? entire property? Approximate mileage: At least one of the debtors and another Other information: ☐ Check if this is community property (see instructions) 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories **2** No Yes Who has an interest in the property? Check one. Do not deduct secured claims or exemptions. Put 4.1 Make: the amount of any secured claims on Schedule D: Debtor 1 only Creditors Who Have Claims Secured by Property. Model: Debtor 2 only Үеаг: Debtor 1 and Debtor 2 only Current value of the
Current value of the Other information: At least one of the debtors and another entire property? portion you own? ☐ Check if this is community property (see instructions) If you own or have more than one, list here: Who has an interest in the property? Check one. Do not deduct secured claims or exemptions. Put 4.2 Make the amount of any secured claims on Schedule D. Debtor 1 only Creditors Who Have Claims Secured by Property. Model: Debtor 2 only Year: Current value of the Current value of the Debtor 1 and Debtor 2 only entire property? portion you own? Other information: At least one of the debtors and another Check if this is community property (see instructions)

Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages you have attached for Part 2. Write that number here

0.00

Case 20-14788-elf DAVID

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Desc Main

Debtor 1

THOMPSON Document Page 4 of 26 number (# known)_

Part 3: **Describe Your Personal and Household Items** Current value of the Do you own or have any legal or equitable interest in any of the following items? portion you own? Do not deduct secured claims or exemptions. 6 Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware ☐ No 200.00 BED AND TOWELS Yes, Describe..... 7. Electronics Examples: Televisions and radios, audio, video, stereo, and digital equipment; computers, printers, scanners, music collections; electronic devices including cell phones, cameras, media players, games 700.00 Yes, Describe...... PRINTER, SMARTPHONE, AND TV 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles ✓ No 0.00 ☐ Yes, Describe..... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis, canoes and kayaks; carpentry tools; musical instruments ☐ No 150.00 Yes Describe..... BICYCLE 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment 0.00 Yes. Describe...... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories ☐ No 350.00 Yes. Describe.......... ALL CLOTHES AND FOOTWEAR 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver ☐ No 20.00 2 Yes, Describe...... EARRINGS 13 Non-farm animals Examples: Dogs, cats, birds, horses No 0.00 ☐ Yes, Describe........ 14 Any other personal and household items you did not already list, including any health aids you did not list ✓ No Yes. Give specific 0.00 information. 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached 1420.00 for Part 3. Write that number here

Debtor 1	Case 20- DAVID First Name		Filed 12/15/20 Entered 12/18/20 14:40:45 Document Page 5 of 26 number (# known)	Desc Main
Part 4:	Describe Yo	ur Financial Assets		
Do you o	wn or have any	legal or equitable interest in a	any of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
16 Cash Examp	oles: Money you	have in your wallet, in your hon	${\sf ne}_{\epsilon}$ in a safe deposit box, and on hand when you file your petition	
☐ No ☑ Ye			Cash:	\$50.00
17. Depos Examp	its of money ples: Checking, s and other si	eavings, or other financial accou imilar institutions. If you have m	ents; certificates of deposit; shares in credit unions, brokerage houses, cultiple accounts with the same institution, list each.	
□ No ☑ Ye	s		Institution name:	
		17.1. Checking account: 17.2. Checking account: 17.3. Savings account: 17.4. Savings account: 17.5. Certificates of deposit:	GREEN DOT BANK BRYN MAWR TRUST	\$ 0.00 \$ 500.00 \$ \$ \$
		17.6. Other financial account: 17.7. Other financial account: 17.8. Other financial account: 17.9. Other financial account:		\$\$ \$\$ \$

	17.8. Other financial account:	\$
	17.9. Other financial account:	\$
18 Bonds, mutual funds,	or publicly traded stocks investment accounts with brokerage firms, money market accounts	
Z No	Investment accounts with blokerage times, money market accounts	
Yes	Institution or issuer name:	
	· · · · · · · · · · · · · · · · · · ·	s
		_ s
		_ s

0.00

0.00

% of ownership:

50

100

19 Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in

☐ No

Yes. Give specific

information about

an LLC, partnership, and joint venture

Name of entity:

FIRST EDAYKITE LLC

CORO HOLDINGS LLC

Doc 6 Filed 12/15/20 Entered 12/18/20 14:40:45 Desc Main THOMPSON Document Page 6 of 26 number (# known)_____ Case 20-14788-elf DAVID Debtor 1 First Name Middle Name 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders, Non-negotiable instruments are those you cannot transfer to someone by signing or delivering thim. ☐ Yes. Give specific Issuer name: information about them.....

			\$
21 Retirement or pension	accounts		
		11(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans	
☑ No			
Yes. List each account separately.	Type of account:	Institution name:	
	401(k) or similar plan:		\$
	Pension plan:		\$
	IRA	THE COLUMN TWO IS NOT	\$
	Retirement account	Se	\$
	Keogh		\$
	Additional account		\$
	Additional account		\$
companies, or others No Yes		d rent, public utilities (electric, gas, water), telecommunications titution name or individual:	
	Electric:		\$
	Gas		\$
	Heating oil:		\$
	Security deposit on ren	tal unit:	\$
	Prepaid rent:		\$
	Telephone:	0	\$
	Water:	Fin	\$
	Rented furniture:		\$
	Other		\$
23. Annuities (A contract for	r a periodic payment o	of money to you, either for life or for a number of years)	
☐ Yes	Issuer name and desc	cription:	
			\$
			\$
			9
Official Form 106A/B		Schedule A/B: Property	page 6

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THOMPSON DOCUMENT Page 7 of 26 number (Flanown) Debtor 1 First Name

24. Interests in an education IRA, in an 26 U.S.C. §§ 530(b)(1), 529A(b), and ☑ No	account in a qualified ABLE program, or under a qualified state tuition program. [529(b)(1).	
	ution name and description. Separately file the records of any interests.11 U.S.C. § 521(c	.)
(7		\$
\$ 		\$
2		\$
25. Trusts, equitable or future interests exercisable for your benefit	s in property (other than anything listed in line), and rights or powers	
☑ No		-
☐ Yes. Give specific		s 0.00
information about them		
	rade secrets, and other intellectual property rebsites, proceeds from royalties and licensing agreements	
Yes. Give specific information about them		\$0.00
27. Licenses, franchises, and other ge	neral intangibles e licenses, cooperative association holdings, liquor licenses, professional licenses	
	e licenses, cooperative association notatings, liquor licenses, professional licenses	
☑ No ☐ Yes. Give specific		7
information about them		\$0.00
Money or property owed to you? 28. Tax refunds owed to you		Current value of the portion you own? Do not deduct secured claims or exemptions.
☑ No		
Yes. Give specific information	Federal	\$
about them, including wheth you already filed the returns	State	\$
and the tax years	Local;	\$
☑ No	nony, spousal support, child support, maintenance, divorce settlement, pro_erty settleme	nt
Yes. Give specific information	Alimony:	\$
	Maintenance	\$
	Support:	\$
	Divorce settlement	\$
	Property settlement;	\$
Social Security benefits; L	nsurance payments, disability benefits, sick pay, vacation pay, workers' compensation, unpaid loans you made to someone else	
No No		
Yes. Give specific information		s0.00
		-

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Debtor 1

AVID	THOMPSON DOCUM

31. Interests in insurance policies Examples: Health, disability, or life insurance. In No.	ce,health savings account (HSA)	credit, homeowner's, or renter's insurance	
Yes. Name the insurance company of each policy and list its value	Company name:	Beneficiary:	Surrender or refund value
of each policy and list its value			\$
			\$
			\$
property because someone has died, ☑ No		nce policy, or are currently entitled to receive	
☐ Yes. Give specific information	*		s0.00
33. Claims against third parties, whether or Examples: Accidents, employment dispute. ☑ No ☐ Yes. Describe each claim			\$ 0.00
34. Other contingent and unliquidated claim	s of every nature, including co	ounterclaimso f the debtor and rights	-
to set off claims			-
Yes. Describe each claim.			s 0.00
35. Any financial assets you did not already ☑ No ☐ Yes. Give specific information	iist		s0.00
36. Add the dollar value of all of your entries for Part 4. Write that number here		stries for pages you have attached	\$550.00
Part 5: Describe Any Business-I	Related Propert Tyou O	wn or Have an Interest In. List any r	eal estate in Part 1.
37. Do you own or have any legal or equitab	le interest in any business-rel	ated property?	
No. Go to Part 6.			
Yes. Go to line 38.			Current value of the portion you own? Do not deduct secured claims or exemptions.
38, Accounts receivable or commissions yo	ou already earred		
□ No			
Yes, Describe			\$
39. Office equipment, furnishings, and supplex: Business-related computers, software		nines, rugs, telephones, desks, chairs, electronic devices	
Yes Describe			

Entered 12/18/20 14:40:45 Desc Main Case 20-14788-elf Doc 6 Filed 12/15/20 DAVID THOMPSON DOCUMENT Page 9 of 26 number (# known)_____ Debtor 1 40. Machinery, fixtures, equipment, supplies you use in business, and tools of your trade ☐ No ☐ Yes. Describe. 41 Inventory ☐ No ☐ Yes. Describe. 42. Interests in partnerships or joint ventures Yes. Describe Name of entity: % of ownership: 43. Customer lists, mailing lists, or other compilations ☐ No ☐ Yes. Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))? Yes. Describe 44. Any business-related property you did not already list ☐ No ☐ Yes: Give specific information 45. Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached for Part 5. Write that number here Describe Any Farm- and Commer ial Fishing-Related Property You Own or Have an Interest In. Part 6: If you own or have an interest in farmland, listit in Part 1. 48. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property No. Go to Part 7. Yes. Go to line 47. **Current value of the** portion you own? Do not deduct secured claims or exemptions. 47 Farm animals Examples: Livestock, poultry, farm-raised fish ☐ No ☐ Yes.....

THOMPSO DOCUMENT Page 10 of 26 number (# known)____ Debtor 1 48. Crops-either growing or harvested □ No ☐ Yes. Give specific information... 49. Farm and fishing equipment, implements, machinery, fixtures, and tools of trade ☐ No ☐ Yes..... 50. Farm and fishing supplies, chemicals, and feed ☐ No Yes. 51. Any farm- and commercial fishing-related property you did not already list ☐ No ☐ Yes. Give specific information..... 52. Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached 0.00 for Part 6. Write that number here Describe All Property You Own or Have an Interest in That You Did Not List Above Part 7: 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership No ☐ Yes. Give specific information... 0.00 54 Add the dollar value of all of your entries from Part 7. Write that number here Part 8: List the Totals of Each Part of this Form 0.00 55 Part 1: Total real estate, line 2.... 0.00 56 Part 2: Total vehicles, line 5 1420.00 57, Part 3: Total personal and household items, line 15 550.00 58 Part 4: Total financial assets, line 36 0 59 Part 5: Total business-related property, line 45 0.00 60. Part 6: Total farm- and fishing-related property, line 52 0.00 61. Part 7: Total other property not listed, line 54 1970.00 Copy personal property total → +\$_ 1970.00 62. Total personal property. Add lines 56 through 61. 1970.00 63. Total of all property on Schedule A/B. Add line 55 + line 62.....

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Case 20-14788-elf

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Fill in this inform	ation to identify your case	:			
Debtor 1 DAV		THOMPSON Last Name	1		
Debtor 2 (Spouse, If filling) First (
- 35	uptcy Court for the EASTERN I	DISTRICT OF PENNSYLVANIA			
Case number(If known)					Check if this is an amended filing
	1000				
Official For Schedul	e C: The Pro	perty You	Claim a	s Exemp	04/19
Using the property space is needed, fil	you listed on Schedule A/B: I	Property (Official Form 106A	/B) as your soun	ce, list the property that	supplying correct information. you claim as exempt. If more of any additional pages, write
specific dollar am of any applicable : retirement funds— limits the exempti	ount as exempt. Alternative statutory limit. Some exem	ely, you may claim the full ptions—such as those for amount. However, if you ount and the value of the	fair market valu health aids, rig claim an exemp	e of the property beir hts to receive certain tion of 100% of fair ma	arket value under a law that
Part 1: Ident	ify the Property You Cla	im as Exempt	_		
You are cl	exemptions are you claiming aiming state and federal nonlaiming federal exemptions. 1 erty you list on Schedule A	pankruptcy exemptions. 11 1 U.S.C. § 522(b)(2)	U.S.C. § 522(b)(3)	
	tion of the property and line I that lists this property	on Current value of the portion you own	Amount of the	exemption you claim	Specific laws that allow exemption
	, , ,	Copy the value from Schedule A/B	Check only one	box for each exemption.	
Brief description:	HOUSEHOLD BED AND TOWEL	<u>\$</u> \$ 200.00	4 \$	200.00	11 U.S.C. § 522(d)(3)
Line from Schedule A/B	: 6			r market value, up to able statutory limit	
Brief description:	ELECTRONICS PRINTER, SMAF	тено \$ 700.00	Ø \$	700.00	11 U.S.C. § 522(d)(5)
Line from Schedule A/B	. 7			r market value, up to able statutory limit	
Brief description:	SPORTS OR HOBBY EQUIPMEN	IT BIC \$ 150.00	Ø \$	150.00	11 U.S.C. § 522(d)(5)
Line from Schedule A/B	9			ir market value, up to able statutory limit	
(Subject to ad	iing a homestead exemption ustment on 4/01/22 and ever		s filed on or after	the date of adjustment	.)
☑ No ☐ Yes. Did y ☐ No ☐ Yes	ou acquire the property cove	red by the exemption within	1,215 days befo	re you filed this case?	

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Debtor 1

Part 2:

Additional Page

	on of the property and line /B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Check only one box for each exemption	
Brief description Line from Schedule A/B:	CLOTHES ALL CLOTHES AND FOOT	w \$350.00	\$ 350.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(3)
Brief description: Line from Schedule A/B:	JEWELRY EARRINGS	\$20.00	\$20.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(4)
Brief description: Line from Schedule A/B:	16	\$50.00	\$ 50.00 100% of fair market value, up to any applicable statutory limit	11 U S.C. § 522(d)(5)
Brief description: Line from Schedule A/B:	CHECKING ACCOUNT GREEN DOT I	Si \$0.00	■ \$ 0.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(5)
Brief description: Line from Schedule A/B:	CHECKING ACCOUNT BRYN MAWR	T \$500.00	\$ 500.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(5)
Brief description: Line from Schedule A/B:	UNINCORPORATED BUSINESS FIRS	ST \$0.00		11 U.S.C. § 522(d)(5)
Brief description: Line from Schedule A/B:	UNINCORPORATED BUSINESS COR	0.00	■ 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(5)
Brief description: Line from Schedule A/B:		\$	\$ 100% of fair market value, up to any applicable statutory limit	
Brief description: Line from Schedule A/B:		\$	□ \$ □ 100% of fair market value, up to any applicable statutory limit	
Brief description: Line from Schedule A/B:		\$	\$ 100% of fair market value, up to any applicable statutory limit	
Brief description: Line from Schedule A/B:		\$	\$ 100% of fair market value, up to any applicable statutory limit	
Brief description: Line from Schedule A/B:		\$	\$ 100% of fair market value, up to any applicable statutory limit	

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Fill in this in	formation to	o identify your case:		ني
Debtor 1	DAVID		THOMPSON	
000001	First Name	Middle Name	Lest Name	
Debtor 2				_
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States I	Bankruptcy Co	urt for the: EASTERN DISTRICT OF	PENNSYLVANIA	
Case number (If known)				

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

☐ Check if this is an amended filing

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

- 1. Do any creditors have claims se ured by your property?
 - No. Check this box and submit this form to the court with your other schedules. You have Lothing else to report on this form.
 - Yes. Fill in all of the information below.

for each claim. If more than one creditor ha	ore than one secured claim, list the creditor separately as a particular claim, list the other creditors in Part 2. abetical order according to the creditor's name.	Column A Amount of claim Do not deduct the value of collaterat.	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
AMERICAN HONDA FINANCE	Describe the property that secures the claim:	s 15639.00	s <u>9014.00</u>	6625.00
Creditor's Name 200 CONTINENTIAL DR STE Number Street	VEHICLE CIVIC HONDA			
NEWARK DE 19713 City State ZiP Code	As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed			
Who owes the debt? Check one	Nature of lien. Check all that apply			
□ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another	An agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit			
Check if this claim relates to a	Other (including a right to offset)	_		
Date debt was incurred 11/29/17	Last 4 digits of account number 4890			
Date debt was incurred 11/29/17	Last 4 digits of account number 4890	\$	sn:	5
Date debt was incurred 11/29/17		\$	s	<u> </u>
Creditor's Name Number Street		\$	\$	5
Date debt was incurred 11/29/17 .2 Creditor's Name	Describe the property that secures the claim: As of the date you file, the claim is: Check all that apply. Contingent	\$	\$ii	5
Creditor's Name Number Street	Describe the property that secures the claim: As of the date you file, the claim is: Check all that apply. Contingent Unliquidated	\$	\$ns	5
Creditor's Name Number Street City State ZIP Code	As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit		\$ns	5
Creditor's Name Number Street City State ZIP Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit		\$	5

Entered 12/18/20 14:40:45 Desc Main Case 20-14788-elf Doc 6 Filed 12/15/20 Page 14 of 26 Document Fill in this information to identify your case: THOMPSON DAVID Debtor 1 Debtor 2 Middle Name (Spouse, if filing) First Name United States Bankruptcy Court for the: EASTERN DISTRICT OF PENNSYLVANIA ☐ Check if this is an Case number amended filing Official Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims 12/15 Be as complete and accurate as possible. Use Part 1 for credito's with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts a d Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known). **List All of Your PRIORITY Unsecured Claims** Part 1: Do any creditors have priority unsured claims against you? No. Go to Part 2. Yes. 2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim⊟ list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.) Total claim **Priority** Nonpriority amount amount s 38000.00 38000.00 0.00NEW JERSEY FAMILY SUPPORT SYSTEM Last 4 digits of account number 127A Priority Creditor's Name 2006 49 RANCOCAS ROAD When was the debt incurred? Number As of the date you file, the claim is: Check all that apply MOUNT HOLLY NJ 08060 Contingent City ZIP Code Unliquidated Who incurred the debt? Check one Disputed Debtor 1 only Debtor 2 only Type of PRIORITY unsecured claim: Debtor 1 and Debtor 2 only Domestic support obligations At least one of the debtors and another Taxes and certain other debts you owe the government Check if this claim is for a community debt Claims for death or personal injury while you were intoxicated Is the claim subject to offset? Other Specify **Ø** No Yes 2.2 Last 4 digits of account number Priority Creditor's Name When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply Contingent City ■ Unliquidated □ Disputed Who incurred the debt? Check one Debtor 1 only Type of PRIORITY unsecured claim: Debtor 2 only Domestic support obligations Debtor 1 and Debtor 2 only Taxes and certain other debts you owe the government At least one of the debtors and another Claims for death or personal injury while you were ☐ Check if this claim is for a community debt intoxicated Other, Specify Is the claim subject to offset? □ No Yes

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	First Name Middle Name Last Name DOCUMENT	Page 15 01 26	
Pa	rt 2: List All of Your NONPRIORITY Unsecured Claims		
3.	Do any creditors have nonpriority unsecured claims against you No. You have nothing to report in this part. Submit this form to the Yes		
4.	List all of your nonpriority unsecured claims in the alphabetical or nonpriority unsecured claim, list the creditor separately for each claim included in Part 1. If more than one creditor holds a particular claim, li claims fill out the Continuation Pag ☐ of Part 2.	. For each claim listed, identify what type of claim it is. Do not li	ist claims already
4.4	1	9594	Total claim
12.	WF CRD SVC Nonpriority Creditor's Name	Last 4 digits of account number 0594	<u>5716.00</u>
	PO BOX 14517 Number Street		
	DES MOINES IA 50306 City State ZIP Code	As of the date you file, the claim is: Check all that apply.	
	Who incurred the debt? Check one. ☑ Debtor 1 only	☐ Contingent☐ Unliquidated☐ Disputed☐	
	Debtor 2 only Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another Check if this claim is for a community debt	Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	Is the claim subject to offset? ☑ No ☑ Yes	Debts to pension or profit-sharing plans, and other similar debts Other, Specify CREDIT CARD	
1.2	DISCOVER FIN SVCS LLC Nonpriority Creditor's Name PO BOX 15316	Last 4 digits of account number 2125 When was the debt incurred? 11/23/16	3192.00
	Number Street WILMINGTON DE 19850	As of the date you file, the claim is: Check all that apply.	
	City State ZIP Code Who incurred the debt? Check one. Debtor 1 only	Contingent Unliquidated Disputed	
	Debtor 2 only Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	☐ At least one of the debtors and another ☐ Check if this claim is for a community debt Is the claim subject to offset? ☑ No	 □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts ☑ Other, Specify CREDIT CARD	
_	Yes		
.3	BANK OF AMERICA Nonpriority Creditor's Name POB 17054	Last 4 digits of account number 5732 When was the debt incurred? 11/21/16	1645.00
	Number Street WILMINGTON DE 19884 City State ZIP Code	As of the date you file, the claim is: Check all that apply.	
	Who incurred the debt? Check one. Debtor 1 only Debtor 2 only	Contingent Unliquidated Disputed	
	Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another Check if this claim is for a community debt	Student loans Obligations arising out of a separation agreement or divorce	
	is the claim subject to offset? ✓ No ☐ Yes	that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other Specify CREDIT CARD	

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Aft	er listing any entries on t⊡s pag	e, number the	em beginning with	h 4.4, followed by 4.5, and so forth.	Total claim
4.4	TRANSWORLD SYSTEM INC/	_		Last 4 digits of account number 3919	s 575.00
	Nonpriority Creditor's Name			When was the debt incurred? 12/20/19	<u> </u>
	500 VIRGINIA DR			When was the debt incurred? 12/20/19	
	Number Street	-		As of the date you file, the claim is: Check all that apply.	
	FORT WASHINGTON	PA	19034		
	City Who incurred the debt? Check on	Ŝtale	ZIP Code	☐ Contingent ☐ Unliquidated ☐ Disputed	
	Debtor 1 only			Ca Disputed	
	Debtor 2 only			Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only			Student loans	
	At least one of the debtors and an			Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	Check if this claim is for a co	mmunity debt		Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?			Other Specify COLLECTION	
	☑ No				
	Yes				
4.5	KOHLS/CAPONE			Last 4 digits of account number 2582	<u>\$ 226.00</u>
	Nonpriority Creditor's Name	(1)		When was the debt incurred? 3/1/16	
	N56 RIDGEWOOD DR			When was the debt incurred? 3/1/15	
	Number Street			As of the date you file, the claim is: Check all that apply	
	MENOMONEE FAL	WI	53051	As of the date you me, the claim is. Offices an mat apply	
	City	State	ZIP Code	☐ Contingent ☐ Unliquidated	
	Who incurred the debt? Check on	е		☐ Disputed	
	Debtor 1 only			Time of NONDBIORITY uncontrol eleient	
	Debtor 2 only			Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only At least one of the debtors and an	othor		Student loans	
	At least one or the debtors and an	oulei		 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
	Check if this claim is for a co	mmunity debt		Debts to pension or profit-sharing plans, and other similar debts	
	is the claim subject to offset?			Other, Specify CREDIT CARD	
	☑ No				
	Yes				
4.6	HARLE TO THE TOTAL PROPERTY OF THE PARTY OF				s 592.00
4.0	DELMARVA POWER	27		Last 4 digits of account number UNKNOWN	\$ 332.00
	Nonpriority Creditor's Name	<u> </u>			
	PO BOX 13609			When was the debt incurred? 2019	
	Number Street	<u> </u>		As of the date you file, the claim is: Check all that apply	
	PHILADELPHIA	PA	19101	As of the date you the, the claim is. Check an that apply	
	City	State	ZIP Code	Contingent Unliquidated	
	Who incurred the debt? Check one	e.		☐ Disputed	
	Debtor 1 only			The MAINTING TO THE STATE OF TH	
	Debtor 2 only			Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only	- 15		☐ Student loans	
	At least one of the debtors and an	otner		Obligations arising out of a separation agreement or divorce that	
	Check if this claim is for a co	mmunity debt		you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?			Other Specify UTILITIES	
	2 No				

Yes

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Afte	er listing any entries on t⊆is page, number them begin	ning with 4.4, followed by 4.5, and so forth.	Total claim
4.7	INSURANCE RECOVERY SERVICES	Last 4 digits of account number093	_{\$} 1233.00
	Nonpriority Creditor's Name TEN LARKFIELD RD.	When was the debt incurred? $11/30/18$	
	Number Street	As of the date you file, the claim is: Check all that apply	
	EAST NORTHPORT NY 11731 City State ZiP Cor		
	Who incurred the debt? Check one.	Unliquidated Disputed	
	Debtor 1 only Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only	Student loans	
	At least one of the debtors and another	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
	☐ Check if this claim is for a community debt	Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?	Other Specify COLLECTION	
	☑ Yes		
	7		
4.8		Last 4 digits of account number 9006	s 27289.00
	CONVERGENT OUTSOURCING INC. Nonprionty Creditor's Name		*
	800 SW 39TH ST , SUITE #100 ; P.O. BOX 9004	When was the debt incurred? $\frac{11/7/16}{}$	
	Number Street RENTON WA 9805	As of the date you file, the claim is: Check all that apply	
	City State ZIP Cod	<u></u>	
	Who incurred the debt? Check one.	Unliquidated	
	Debtor 1 only	☐ Disputed	
	Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only	☐ Student loans	
	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that	
	☐ Check if this claim is for a community debt	you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?	Other Specify COLLECTION	
	☑ No □ Yes		
\Box	-m	Last 4 digits of account number	\$
	Nonpriority Creditor's Name	When was the debt incurred?	
	Number Street	As of the date you file, the claim is: Check all that apply	
	City State ZIP Coo		
	·	Unliquidated	
	Who incurred the debt? Check one.	☐ Disputed	
	Debtor 1 only Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only	☐ Student loans	
	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that	
	☐ Check if this claim is for a community debt	you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
	is the claim subject to offset?	Other, Specify	
	□ No		

☐ Yes

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Part 4:

Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C.§ 159. Add the amounts for each type of unsecured claim.

			Total claim	
Total claims	6a. Domestic support obligations	6a.	\$	38000.00
from Part 1	6b. Taxes and certain other debts you owe the government		\$	0.00
	6c. Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d. Other. Add all other priority unsecured claims. Write that amount here.	6d.	+s	0.00
	6e. Total. Add lines 6a through 6d.	6e.	\$	38000.00
			Total claim	
			lotal claim	
Total claims	6f. Student loans	6f.	s	0.00
Total claims from Part 2	6f. Student loans 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6f. 6g.		0.00
	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority	7.00		
	 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims 6h. Debts to pension or profit-sharing plans, and other 	6g.		0.00

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		D(ocument Page	19 of 26	
Fil	l in this information to id	dentify your case:			
De	btor DAVID	4000-14	THOMPSON	_	
	btor 2	Middle Name	Last Name	_	
	ouse (filing) First Name	Middle Name EASTERN DISTRICT OF	Last Name PENNSYLVANIA		
	ited States Bankruptcy Court	for the:			
	se numberknown)				Check if this is an amended filing
			<u> </u>	_	
Of	ficial Form 106	G			
Sc	:hedule G: E	 xecutory Con	tracts and U	nexpired Leases	12/15
info addi	rmation. If more space is itional pages, write your Do you have any execu No. Check this box a	s needed, copy the addition name and case number (if attention to the addition of the addition	al page, fill it out, numb known). I leases? with your other schedules.	ner, both are equally responsible for suppler the entries, and attach it to this page. On You have nothing else to report on this formed on Schedule A/B: Property (Official Form 1	n the top of any
2.	List separately each pe example, rent, vehicle I unexpired leases.	rson or company with whore ease, cell phone). See the in	n you have the contract estructions for this form in	or lease. Then state what each contract or the instruction booklet for more examples of e	lease is for (for executory contracts and
	Person or company wif	th whom you have the conti	ract or lease	State what the contract or lease is for	r
1		,			
2.1			_		
	DELORES R. THO	MPSON	F	RENT	
	6105 MASTER ST	REET n			
60	PHILADELPHIA	PA 19151 State ZIP Code			
0.0	City	State ZIP Code			
2.2					
	Name	D .			
	Number Street	fi.			
	215	State 715 Onde			
2.3	City	State ZIP Code			
2.3		[7]			
18	Name				
	Number Street				
	City	State 7IB Code			
	City	State ZIP Code			
2.4					
	Name	0			
	Number Street				
		0			
	City	State ZIP Code			

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ebtor 1	DAVID		THOMPSON		
Debtor 1	First Name	Middle Name	Last Name		
Debtor 2					
spouse, if filing)	First Name	Middle Name	Last Name		
pouse if filing)	First Name Bankruptcy Court f	EACTEDM DICTRICT			

☐ Check if this is an amended filing

Official Form 106H

Schedule H: Your Codebtors

12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Addit | I Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every quesn.

se number (if known). Answer eve			
Do you have any codebtors? (If y □ No ☑ Yes	you are filing a joint case, d	lo not list either spouse as	a codebtor.)
_ :			(Community property states and territories include ngton, and Wisconsin.)
No. Go to line 3.			
Yes. Did your spouse, former	spouse, or legal equivalent	live with you at the time?	
□ No	fiv	·	
— …	state or territory did you live	? .	Fill in the name and current address of that person.
	,,		,
Name of your spouse, former spou	use, or legal equivalent		
Number Street	- 11		
City	State	ZIP Code	
•			
shown in line 2 again as a code	btor only if that person is	a guarantor or cosigner	if your spouse is filing with you. List the person Make sure you have listed the creditor on G (Official Form 106G), Use Schedule D.
shown in line 2 again as a code	btor only if that person is), Schedule E/F (Official F	a guarantor or cosigner	. Make sure you have listed the creditor on e G (Official Form 106G). Use Schedule D, Column 2: The creditor to whom you owe the debt
shown in line 2 again as a codel Schedule D (Official Form 106D) Schedule E/F, or Schedule G to Column 1: Your codebtor	btor only if that person is), Schedule E/F (Official F	a guarantor or cosigner	. Make sure you have listed the creditor on e G (Official Form 106G). Use Schedule D,
shown in line 2 again as a codel Schedule D (Official Form 106D) Schedule E/F, or Schedule G to Column 1; Your codebtor	btor only if that person is), Schedule E/F (Official F	a guarantor or cosigner	. Make sure you have listed the creditor on e G (Official Form 106G). Use Schedule D, Column 2: The creditor to whom you owe the debt
shown in line 2 again as a codel Schedule D (Official Form 106D) Schedule E/F, or Schedule G to Column 1: Your codebtor	btor only if that person is), Schedule E/F (Official F	a guarantor or cosigner	. Make sure you have listed the creditor on e G (Official Form 106G). Use Schedule D, Column 2: The creditor to whom you owe the debt Check all schedules that apply:
shown in line 2 again as a codel Schedule D (Official Form 106D) Schedule E/F, or Schedule G to Column 1; Your codebtor	btor only if that person is), Schedule E/F (Official F	a guarantor or cosigner	. Make sure you have listed the creditor on e G (Official Form 106G). Use Schedule D, Column 2: The creditor to whom you owe the debt Check all schedules that apply: Schedule D, line
shown in line 2 again as a codel Schedule D (Official Form 106D) Schedule E/F, or Schedule G to Column 1; Your codebtor	btor only if that person is), Schedule E/F (Official F	a guarantor or cosigner	. Make sure you have listed the creditor on e G (Official Form 106G). Use Schedule D, Column 2: The creditor to whom you owe the debt Check all schedules that apply: Schedule D, line Schedule E/F, line
shown in line 2 again as a codel Schedule D (Official Form 106D) Schedule E/F, or Schedule G to Column 1: Your codebtor Name Number Street	btor only if that person is), <i>Schedule E/F</i> (Official F fill out Column 2.	a guarantor or cosigner orm 106E/F), or Schedul	. Make sure you have listed the creditor on e G (Official Form 106G). Use Schedule D, Column 2: The creditor to whom you owe the debt Check all schedules that apply: Schedule D, line Schedule E/F, line
shown in line 2 again as a codel Schedule D (Official Form 106D) Schedule E/F, or Schedule G to Column 1: Your codebtor Name Number Street	btor only if that person is), <i>Schedule E/F</i> (Official F fill out Column 2.	a guarantor or cosigner orm 106E/F), or Schedul	. Make sure you have listed the creditor on e G (Official Form 106G). Use Schedule D, Column 2: The creditor to whom you owe the debt Check all schedules that apply: Schedule D, line Schedule E/F, line Schedule G, line
shown in line 2 again as a codel Schedule D (Official Form 106D) Schedule E/F, or Schedule G to Column 1: Your codebtor Name Number Street City DOLORES THOMPSON Name 6105 MASTER STREET	btor only if that person is), <i>Schedule E/F</i> (Official F fill out Column 2.	a guarantor or cosigner orm 106E/F), or Schedul	. Make sure you have listed the creditor on e G (Official Form 106G). Use Schedule D, Column 2: The creditor to whom you owe the debt Check all schedules that apply: Schedule D, line Schedule E/F, line Schedule G, line Schedule D, line
shown in line 2 again as a codel Schedule D (Official Form 106D) Schedule E/F, or Schedule G to Column 1: Your codebtor Name Number Street City DOLORES THOMPSON Name 6105 MASTER STREET Number Street	btor only if that person is), <i>Schedule E/F</i> (Official F fill out Column 2.	a guarantor or cosigner orm 106E/F), or Schedul ZIP Code	. Make sure you have listed the creditor on e G (Official Form 106G). Use Schedule D, Column 2: The creditor to whom you owe the debt Check all schedules that apply: Schedule D, line Schedule E/F, line Schedule G, line
shown in line 2 again as a codel Schedule D (Official Form 106D) Schedule E/F, or Schedule G to Column 1: Your codebtor Name Number Street City DOLORES THOMPSON Name 6105 MASTER STREET	btor only if that person is), <i>Schedule E/F</i> (Official F fill out Column 2.	a guarantor or cosigner orm 106E/F), or Schedul	. Make sure you have listed the creditor on e G (Official Form 106G). Use Schedule D, Column 2: The creditor to whom you owe the debt Check all schedules that apply: Schedule D, line Schedule E/F, line Schedule G, line Schedule D, line
shown in line 2 again as a codel Schedule D (Official Form 106D) Schedule E/F, or Schedule G to Column 1: Your codebtor Name Number Street City DOLORES THOMPSON Name 6105 MASTER STREET Number Street PHILADELPHIA	btor only if that person is), Schedule E/F (Official F fill out Column 2. State	a guarantor or cosigner orm 106E/F), or Schedul ZIP Code	. Make sure you have listed the creditor on e G (Official Form 106G). Use Schedule D, Column 2: The creditor to whom you owe the debt Check all schedules that apply: Schedule D, line Schedule E/F, line Schedule G, line Schedule E/F, line
shown in line 2 again as a codel Schedule D (Official Form 106D) Schedule E/F, or Schedule G to Column 1: Your codebtor Name Number Street City DOLORES THOMPSON Name 6105 MASTER STREET Number Street PHILADELPHIA City	btor only if that person is), Schedule E/F (Official F fill out Column 2. State	a guarantor or cosigner orm 106E/F), or Schedul ZIP Code	. Make sure you have listed the creditor on e G (Official Form 106G). Use Schedule D, Column 2: The creditor to whom you owe the debt Check all schedules that apply: Schedule D, line Schedule E/F, line Schedule G, line Schedule E/F, line Schedule G, line
shown in line 2 again as a codel Schedule D (Official Form 106D) Schedule E/F, or Schedule G to Column 1: Your codebtor Name Number Street City DOLORES THOMPSON Name 6105 MASTER STREET Number Street PHILADELPHIA City 3	btor only if that person is), Schedule E/F (Official F fill out Column 2. State	a guarantor or cosigner orm 106E/F), or Schedul ZIP Code	. Make sure you have listed the creditor on e G (Official Form 106G). Use Schedule D, Column 2: The creditor to whom you owe the debt Check all schedules that apply: Schedule D, line Schedule E/F, line Schedule G, line Schedule G, line Schedule G, line Schedule G, line
shown in line 2 again as a codel Schedule D (Official Form 106D) Schedule E/F, or Schedule G to Column 1: Your codebtor Name Number Street City DOLORES THOMPSON Name 6105 MASTER STREET Number Street PHILADELPHIA City 3	btor only if that person is), Schedule E/F (Official F fill out Column 2. State	a guarantor or cosigner orm 106E/F), or Schedul ZIP Code	. Make sure you have listed the creditor on e G (Official Form 106G). Use Schedule D, Column 2: The creditor to whom you owe the debt Check all schedules that apply: Schedule D, line Schedule E/F, line Schedule G, line Schedule E/F, line Schedule G, line

Fill in this information to identify	your case:					
Debtor 1 DAVID	Middle Name	THOMPSON				
First Name Debtor 2 (Spouse if filing) First Name		Last Name				
	EASTERN DISTRICT OF PENI					
Case number				Check if th	is is:	
(If known)					ended filing	
					lement showing post as of the following d	
Official Form 106I				MM / DI	D/ YYYY	
Schedule I: You	ır Income					12/15
Be as complete and accurate as posupplying correct information. If you are separated and your spouseparate sheet to this form. On the	ou are married and not filir use is not filing with you, d top of any additional pag	ng jointly, and you lo not include info	ır spouse is rmation abo	living with your spou	ou, include information use. If more space is n	n about your spouse. eeded, attach a
1. Fill in your employment information.		Debtor 1			Debtor 2 or non-fil	ling spouse
If you have more than one job, attach a separate page with information about additional employers.	Employment status	☐ Employed ☐ Not employe	d		☐ Employed ☐ Not employed	
Include part-time, seasonal, or self-employed work.						
Occupation may include student or homemaker, if it applies.	Occupation					
	Employer's name		<u></u>			
	Employer's address	Number Street			Number Street	<u>. </u>
		City	State ZIP	Code	City	State ZIP Code
	How long employed then	e?			3 	
Part 2: Give Details About	t Monthly Income					
Estimate monthly income as of spouse unless you are separated if you or your non-filing spouse he below. If you need more space, a	ave more an one employer, o	co mbine the infor	mation for al	l employers fo	or that person on the line	
			For	Debtor 1	For Debtor 2 or non-filing spouse	
 List monthly gross wages, sal deductions). If not paid monthly, 	ary, and commissions (bef calculate what the monthly	fore all payroll wage would be	2 \$	0.00	\$	
3. Estimate and list monthly over	rtime pay.		3, +\$	0.00	+ s	
4. Calculate gross income. Add li	ne 2 + line 3.		4,, \$	0.00	\$	

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Debtor 1

DAVID First Name Case number (# known)_

		For	Debtor 1	For Debtor 2 or non-filing spouse	
Copy line 4 here	≯ 4.	\$	0.00	\$	
5. Indicate whether you have the payroll deductions below:					
5a. Tax, Medicare, and Social Security deductions	5a.	s	0.00	\$	
5b. Mandatory contributions for retirement plans	5b.	s	0.00	\$	
5c. Voluntary contributions for retirement plans	5c.	\$	0.00	s	
5d. Required repayments of retirement fund loans	5d.	s	0.00	\$	
5e. Insurance	5e.	S	0.00	\$	
5f. Domestic support obligations	5f.	5	0.00	\$	
	5g.	\$	0.00	s	
5g. Union dues	5h.	+s	0.00	+ s	
5h. Other deductions. Specify:				7/	
6. Add the payroll deductions, Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h		\$_	0.00	\$	
7. Calculate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$_	0.00	\$	
8. List all other income regularly received:					
8a. Net income from rental property and from operating a business, profession, or farm	8a.	\$_	0.00	\$	
Attach a statement for each property and business showingross receipts, ordinary and necessary business expenses, and the total monthly net income.					
8b. Interest and dividends		\$	0.00	\$	
8c. Family support payments that you, a non-filing spouse, or a depende regularly receive	ent	\$	0.00	\$	
Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.					
8d. Unemployment compensation		\$	700.00	\$	
8e. Social Security		\$	657.46	\$	
8f. Other government assistance that you regularly receive					
Include cash assistance and the value (if known) of any non-cash assistance that you receive such as food stamps or housing subsidies.					
Specify (Debtor 1): Specify (Debtor 2 or Non-Filing Spouse)					
SNAP		s	194.00	\$	
8g. Pension or retirement income		\$	0.00	\$	
8h. Other monthly income.					
Specify (Debtor 1): Specify (Debtor 2 or Non-Filing Spouse)					
		\$	0.00	\$	
9. Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h.		\$_	1551.46	\$	
10 Calculate monthly income. Add line 7 + line 9.		\$_	1551.46	+ \$=	\$ <u>1551.46</u>
Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filling spouse.					
11. State all other regular contributions to the expenses that you list in Sched Include contributions from an unmarried partner, members of your household, your dependents, your roor relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to proceed the contribution.	mmates,	and oth	er friends or ed in Schedule J		
Specify: FRIEND(S)				11a±	\$ 20.00
12. Add the amount in the last column of line 10 to the amount in line 11. The Write that amount on the Summary of Your Assets and Liabilities and Certain S					1571.46
13. Do you expect an increase or decrease within the year after you file this f					Combined monthly income
No. I EXPECT NO CHANGE IN INCOME IN T	HEI	NEX.	Γ 12 MON	THS	

Fill	l in this information to identify	your case:				
Del	btor 1 DAVID	THOMPSON Middle Name Last Name	Check if th	nis is:		
	btor 2		An amo	ended fili	ng	
1 ' '	ouse; if filling) First Name	Middle Name Lest Name EASTERN DISTRICT OF PENNSYLVANIA	☐ A supp		howing postp the following	etition chapter 13
1	se number			D / YYYY	—	dato.
	known)					
Of	ficial Form 106J					
	chedule J: Yo	ur Expenses				12/15
Be a	es complete and accurate as po	ossible. If two married people are filined, atta another sheet to this form.	ng together, both are equally (On the top of any additional	responsib pages, w	le for supplyi	ing correct e and case number
Par	t 1: Describe Your Hou	sehold				
1. Is	this a joint case?					
	No. Go to line 2. Yes. Does Debtor 2 live in a s	separate household?				
	□ No					
	Yes, Debtor 2 must file	e Official Form 106J-2, Expenses for S	eparate Household of Debtor 2.			
	o you have dependents? o not list Debtor 1 and	✓ No✓ Yes. Fill out this information for	Dependent's relationship to Debtor 1 or Debtor 2		Dependent's ige	Does dependent live with you?
	ebtor 2.	each dependent				□ No
	o not state the dependents' ames.					☐ Yes ☐ No
						Yes
						□ No
						☐ Yes ☐ No
						Yes
				_	<u></u>	□ No
						Yes
63	o your expenses include xpenses of people other than ourself and your dependents?	☑ No □ Yes				
Part		ing Monthly Expenses				
		r bankruptcy filing date unless you a	re using this form as a supple	ement in a	Chapter 13 c	case to report
exp	enses as of a date after the bar licable date.	nkruptcy is filed. If this is a supplem	ental Schedule J, check the bo	ox at the t	op of the form	n and fill in the
		n-cash government assistance if you			Your expe	nses
		d it on Schedule I: Your Income (Offi		4		
	The rental or home ownership of any rent for the ground or lot.	expenses for your residence. Include	ilist mortgage payments and	4.	\$	100.00
	If not included in line 4:			40	•	0.00
	4a. Real estate taxes			4a. 4b.	\$	0.00
	4b Property, homeowner's, or r			40. 4c.	s	0.00
	4c. Home maintenance, repair,4d. Homeowner's association o			4d.	\$	0.00
	TO I TOTAL CONTROL OF GOOD GROUND V					_

 Debtor 1
 DAVID
 THOMPSON
 Case number (# known)

 First Name
 Middle Name
 Last Name

			Your ex	penses
5.	Additional mortgage payments for your residence, such as home equity loans	5	\$	0.00
6,	Utilities: 6a. Electricity, heat, natural gas	6a.	S	40.00
	6b. Water, sewer, garbage collection	6b.	\$	20.00
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	<u> </u>	80.00
	6d. Other. Specify:	6d.		0.00
7:		7.	s	150.00
8.	Childcare and children's education costs	8.	S	0.00
9.	Clothing, laundry, and dry cleaning	9.	s	
10.	Personal care products and services	10	\$	
11.	"	1123		0.00
12.				
14.	Do not include car payments.	12	\$	40.00
13	Entertainment, clubs, recreation, newspapers, magazines, and books	13,	\$	20.00
14.	Charitable contributions and religious donations	14,	\$	0.00
15	Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.			
	15a. Life insurance	15a.	\$	0.00
	15b. Health insurance	15b	\$	0.00
	15c. Vehicle insurance	15c.	\$	550.00
	15d. Other insurance, Specify:	15d.	\$	0.00
16.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify:	16	\$	0.00
17.	Installment or lease payments:			
	17a. Car payments for Vehicle 1	17a.	\$	425.00
	17b. Car payments for Vehicle 2	17b.	\$	
	17c. Other Specify:	17c.	\$	0.00
	17d. Other, Specify:	17d.	\$	0.00
18.	Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	\$	0.00
19.	Other payments you make to support I thers who do not live with you.			
	Specify:	19.	\$	0.00
20.	Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Incom	ie.		0.00
	20a. Mortgages on other property	20a	\$	_
	20b, Real estate taxes	20b	\$	
	20c. Property, homeowner's, or rent r's insurance	20c	\$	
	20d. Maintenance, repair, and upkeep expenses	20d	\$	
	20e. Homeowner's association or condominium dues	20e	\$	0,00

Debtor 1	DAVID		THOMPSON	Ca	ase number (# Anown)		
Death.	First Name	Middle Name	Last Name				
21. Oth	er. Specify:				21.	+\$	0.00
		this sussesses					
22. Calc	culate your moi	thly expenses.					
22a.	Add lines 4 thro	ough 21			22a	\$	1620.00
22b.	Copy line 22 (n	onthly expenses	for Debtor 2), if any, from Offici	ial Form 106J-2	22b	S	0.00
22c.	Add line 22a ar	d 22b. The result	is your monthly expenses.		22c.	\$	1620.00
23, Calcu	ulate your mon	thly net income.					1571.46
23a	Copy line 12 ()	our combined mo	onthly income) from Schedule I.		23a.	\$	15/1.46
23b.	Copy your mor	ithly expenses fro	om line 22c above		23b.	-\$	1620.00
23c.	Subtract your i	monthly expenses	s from your monthly income.			_	-48.54
	The result is ye	our monthly net in	icome.		23c.		10.07
24. Do y	ou expect an in	crease or decre	ase in your expenses within t	he year after you file	this form?		
For e	example, do you	expect to finish p	aying for your car loan within th	e year or do you expe	ct your		
		increase or decr	rease because of a modification	to the terms of your if	iongage r		
Пи							
₽ Y	es. Explain	here: I EXPEC	T A CHANGE IN WITHIN	I THE NEXT 12 M	ONTHS BECAUS	SE OF MO	VING

Document Page 26 of 26	
Fill in this information to identify your case:	
Debtor 1 DAVID THOMPSON First Name Middle Name Last Name	
Debtor 2	
(Spouse, if filing) First Name Middle Name Last Name Last Name EASTERN DISTRICT OF PENNSYLVANIA	1
United States Bankrupicy Court for the:	
Case number (ff known)	☐ Check if this is an
	amended filing
Official Form 106Dec	
Declaration About an Individual Debtor's Schedule	25 12/15
If two married people are filing together, both are equally responsible for upplying correct information.	
Sign Below Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?	
Yes. Name of personAttach Bankruptcy Petition Preparer's Notice	Declaration, and
Signature (Official Form 119)	
Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct. Signature of Debtor 1 Signature of Debtor 2	
Date // D J J J Date MM / DD / YYYY	